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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DO		CONFIRMATION NO.
10/714,163 TITLE OF INVENTION POTENTIALLY USEFU		TIFYING A USEFUL S	Lawrence M. Kauvar SET OF SIGNAL TRAN	SDUCTION PROT		88512010411 ROM A MULTIPLIC	2892 ITY OF
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0		\$1055	02/17/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
VENCI, I	DAVID J	1641	435-007600	_			
1. Change of correspondence address or indication of "Fee Address" (37) CFR 1.563). CFR 1.563. Change of correspondence address or Change of Correspondence (A) the names of up to 3 registered patient attorneys or agents OR, alternatively, and the patient of							cument has been filed for
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Authorized Signature	/Kate H. Mura		c Onice.	Date	Fe	ebruary 3, 2009	
Typed or printed name Kate H. Murashige				Registration N	o29	9,959	
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